

# File a Claim

Claims can be filed online or by submitting a claim form. Copies of the claim forms and instruction for online submission can be found at <a href="https://www.aflacgroupinsurance.com/customer-service/file-a-claim.aspx">https://www.aflacgroupinsurance.com/customer-service/file-a-claim.aspx</a>



#### • How do I file a claim?

Our claim forms are available under the Filing a Claim tab. Please read and follow the detailed instructions for each applicable form, making sure to complete it in its entirety and signing where requested. If you have questions or need help completing a form, call our Customer Service Center at 800.433.3036.

## Are there online options for claims filing?

Yes, you can submit your claim online at aflacgroupinsurance.com. Access the Customer Service option and follow the "File a Claim" process.

 What if all the provisions of the certificate are not met? How will it affect my claims processing time?

Claims submitted for benefits that may be subject to a pre-existing condition exclusion, a waiting period, or the certificate's contestability period may require additional medical information that can extend processing time.

Also, you will be notified within 7 to 10 business days if a claim form is not completed in its entirety or is not signed. Incomplete or unsigned forms will delay claim processing.

 Will my claim be expedited if I send my claim form to you by express mail?

Sending your claim form by express mail will expedite the receipt of your claim form but will not expedite claim processing. Claims are processed in the order in which they are received; they are not prioritized by delivery method.



## How long do I have to file a claim?

There is a one-year timely filing provision in your certificate. Please review the provision and call us with any questions.

## How do I submit my claim form for processing?

You may submit your claim form online for a Wellness, Accident, Hospital Indemnity or Critical Illness benefit at aflacgroupinsurance.com. You can mail your claim form to Post Office Box 84075, Columbus, Georgia 31993. You may also fax your claim form to our claims department at 866.849.2970 or scan and email your claim form to groupclaimfiling@aflac.com.

#### What information do I need to file a claim?

It's important to follow the detailed instructions included on each claim form and to sign each form where indicated. Our claim forms are all available on the Claims tab, and instruct you to consider the following:

**Group Disability Insurance Claims** - There are three areas on this form: one that requires specific information from you, one that requires specific information from your employer, and one that requires specific information from your attending physician. Be sure to sign and date the authorization portion of Part A, as well as all other applicable forms.

**Group Supplemental Hospital Indemnity Insurance Claims** - We'll need an itemized bill showing admission and discharge dates, inpatient room charges for semiprivate or private rooms, a diagnosis, and any additional forms or bills related to your treatment.

**Group Accident Insurance Claims** - Using the appropriate claims form, send us a complete description of your accident. If you were involved in a motor vehicle accident, we'll need a copy of the police or accident report. If your injury occurred on the job, please attach a copy of the first report of injury filed with your employer. If you were first treated in an emergency room, please attach a copy of the discharge papers from the hospital. All medical bills and supporting documents related to your injury should verify the diagnosis, the specific procedure or treatment and the supplies used.

**Group Critical Illness Insurance Claims** - Notice that the claimant's birth certificate is required with the other critical illness insurance claim documentation. Please make sure your treating physician completes the second page (Attending Physician's Statement).



**Group Cancer Insurance Claims** - When you send your cancer insurance claim documentation, include a pathology report used in the diagnosis of a malignant cancer, any itemized medical bills with the diagnosis and procedure codes, and the claimant's birth certificate.

**Beneficiary's Statement for Death Claim** - Certified copies of the deceased person's birth certificate and death certificate are needed to process your claim. If the cause of death is an injury or accident, include a copy of any related police report and/or newspaper articles. The beneficiaries must sign and print their name at the bottom of the claim form.

## I submitted a claim form. Did you receive it?

Once a claim form has been received, it normally takes two to three working days to pre-process the claim before it is sent to the claims examiner for processing. During this pre-processing stage, the claim form is not accessible for review. It will become accessible once pre-processing is complete and the claim is entered into the claim system.

Please closely follow the instructions on the claim form and sign in all places indicated before mailing it and all required documentation to us.